



Receipt

Application of

Applicant

: Cynthia Roberts et al.

Serial No.

: 10/531,345

Filed

: April 15, 2005

Title

: CUSTOMIZED TRANSITION ZONE SYSTEM AND METHOD FOR AN

**ABLATION PATTERN** 

Docket

: OSU0010PA/41096.25

Art Unit

: 1600

Confirm. No.: 8235

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313

1450 on February 7, 2006

Attorney Kristina E. Swanson

Reg. No. 53,657

# **COMMUNICATION**

In reviewing the corrected filing receipt for the above-identified application, it was noted that the Applicant's city is incorrect on the filing receipt. "Albany" should be --New Albany--. The correct city is set out on the application filed on April 15, 2005.

Applicants respectfully request that a corrected filing receipt accurately indicating the Applicant's city as designated by applicants on their application be issued and sent to the undersigned attorney.

Respectfully submitted, DINSMORE & SHOHL LLP

Kristina E. Swanson

Reg. No. 53,657

One Dayton Centre

One South Main St., Suite 1300

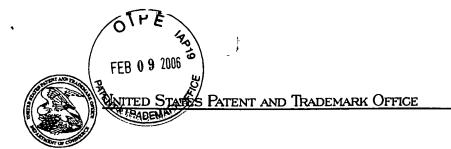
Dayton, OH 45402-2023 Telephone: 937/449-6400

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Encl.

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UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Viginia 22313-1450

ļ	APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY.DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
	10/531,345	04/15/2005	1600	1000	OSU0010PA/41096.25	13	20	3

**CONFIRMATION NO. 8235** 

23368 DINSMORE & SHOHL LLP ONE DAYTON CENTRE, ONE SOUTH MAIN STREET **SUITE 1300** DAYTON, OH 45402-2023

**CORRECTED FILING RECEIPT** \*OC000000017942002\*

AMW

RECEIVED

FEB 0 1 2006

FER 01 2006

Date Mailed: 01/30/2006

Receipt is acknowledged of the Cartes Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please mail to the Commissioner for Patents P.O. Box 1450 Alexandria Va 22313-1450. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

### Applicant(s)

Cynthia Roberts, Columbus, OH; Ashraf Mahmoud, Albany, OH; \*New Albany

Power of Attorney: The patent practitioners associated with Customer Number 23368.

## Domestic Priority data as claimed by applicant

This application is a 371 of PCT/US03/32616 10/15/2003

#### Foreign Applications

UNITED STATES OF AMERICA 60418511 10/15/2002

If Required, Foreign Filing License Granted: 01/30/2006

The country code and number of your priority application, to be used for filing abroad under the Paris Convention, is **US10/531.345** 

**Projected Publication Date:** Not Applicable

Non-Publication Request: No

Early Publication Request: No

Title

Customized transition zone system and method for an ablation pattern

**Preliminary Class** 

329

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